

PART B - FEE(S) TRANSMITTAL

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Barbara Thomas	(Depositor's name)
	(Signature)
November 1, 2007	(Date)

23869 7590 08/06/2007
HOFFMANN & BARON, LLP
6900 JERICHO TURNPIKE
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 11/06/2007 EAYALEW2 00000026 082461 10536709

01 FC:8001 30.00 DA
 02 FC:1504 300.00 DA
 03 FC:1501 1440.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/538,709	05/03/2006	Yi Zeng	1557-2 PCT/US	3790

TITLE OF INVENTION: METHOD OF PROCESSING MARINE MAGNETIC GRADIENT DATA AND EXPLORATION METHODS USING THAT DATA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/06/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
HUYNH, PHUONG	2857	702-091000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

BHP Billiton Innovation PTY LTD. Victoria, Australia

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies 10

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- ☐ A check is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 08-2461 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

John S. Sopko

Date November 1, 2007

Typed or printed name

Registration No. 41,321

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